Porm 507, Rev. 7/04

				<u></u>					
EX	E CUT	IVE I	OBBYING EXP FORM 507	ENDITU	RE REPO	RT			
	COVE	ring jan	TUARY 1 - JUNE 30.	DOE AT	GUST 15	1			OR OFFICE USE ONLY
7	cove	ring tar	NIARY 1 - DECEMBER 8	1, 2008 - D	UE FERRUARY :	15		Ů ₽<	ormark Date: 2/13/109
						1		٦١٩	Ra- 2/16
<u>12(1 ()</u>)Ř	rthe Box	rd of Kth	ics, 2415 Quail Dr., 3rd I	Moor, Batton A	tonge, to voon	'			
ex 10:	(225)76	2-8787 c	r (225)763-8 78 0					- [3642042
			·						0014042
ı.	Name	Ren	gel	Teme	<u> </u>	N.		.]	
		Lest		First.		745		l_	
2,	Barriness .	Address:_	1515 Poydras Street, S	Bulto 2570	New Orleans		70112		
			Street and No.		City	States	Ζip		
	Maliing .	Address_	Same as Above		<u></u>			-	
3.	Businesa	Phone _	(504) 567-2267		 				
			Area Code and T	elephone Num	bet				
4.	Total of a	ill execut expendit	ive lobbying expenditures ares from Schedules A and I	j made Jamus K)	y 1 through June	30: \$_	0.00		<u> </u>
\$.	Total of a (When a	iil execut Applicable	ive lobbying expenditure) (Include expenditures fro	s made July 1 om Schodules A	through Decemb and B)	mer 31: \$_	0.00		_ _
6.			ive lobbying expenditure ac 5 should equal Line 6)	s made during	calendar year:	8_	0.00		
7.	Did you	mekė in	expenditure exceeding \$5	O an one occa	sion for an execu	ntive branc	h official:		
	From J From J	enuary l uly 1 thre	through June 30? ough December 31?	Yes Yes		No No	, NA	ū	
	If the at	uswer to	Hither question in Number	r 7 above is Y	ES, complete Sch	edule A an	d ettach.		
			•						9 5 8 :
6	Did you	make ex	penditures exceeding the	gum a r \$ 250 fi	or an executive b	manch offic	ial:		Missing ablank and on them.
			T. T 200		п	w. 1			issing ank an them
	From Ju	omary) t lyl throa	hrough June 30? ugh December 31?	Yes		×	NA	□	n d
	If the ac	wet to c	rither question in Number	r 8 above is YI	ES, complete Sch	eđule A an	d much.		had 1
9	Did yeu	erpend t	ntraign June 307 igh December 31? ither question in Number funds for any reception, 3: ited during this reporting Yes Number 9 above is YES, c	odal gatherio period?	g, or other functi	on to white	h more than	twenty-f	of the contrast of
			Yes		No 15	1			ring ges
	If the at	oswer to l	Number 9 above is YES, c	omplete Sche	dule B and attack	L			were

Page 1 of <u>5</u>

EXECUTIVE LOBBYING EXPENDITURE REPORT



10. PROVIDE BELOW (a) the name of the executive branch department as least in the executive branch schedule; (b) the aggregate total of all expenditures attributable to the department made during the January 1 - have 30 reporting period; (c) the aggregate total expenditures attributable to the department made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year surributable to the department.

1)	a. Name of Department: N/A	<u> </u>
	b. Fotal of all expenditures made January 1 through June 30:	<u> </u>
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year.	s
Z)	a. Name of Department.	
	b. Total of all expenditures made January 1 through June 30:	<u> </u>
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	1
3)	a. Name of Department:	<u> </u>
	b. Total of all expenditures made January 1 through June 30:	t
	 Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year.	\$

11. PROVIDE BELOW (a) the name of the executive branch department and the individual agency as fixed in the executive branch schedule; (b) the aggregate total of all expenditures surflutable to the agency made during the January 3 - June 30 reporting period; (c) the aggregate total of all expenditures synthumble to the agency made during the July 1 - December 31 reporting period when applicable; (d) the aggregate total of all expenditures made in a calendar year stributable to the agency.

1)	a. Name of Department and Individual Agency: NA	
	b. Total of all expenditures made January 1 through June 30:	\$
	 c. Total of all expenditures made fully 1 through December 31: (When applicable) 	<u> </u>
	d. Total of all expenditures made during the calendar year:	\$

2)	Name of Department and Individual Agency:	
	b. Total of all expanditures made January 1 through June 30:	£
	 c. Total of all expenditures made July 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year.	\$
3)	a. Name of Department and Individual Agency:	
	b. Total of all expenditures made January 1 through June 30:	\$·
	 Total of all expenditures made fully 1 through December 31: (When applicable) 	\$
	d. Total of all expenditures made during the calendar year:	\$

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Hobbyist